Case 18-18149 Doc 1 Filed 06/26/18 Entered 06/26/18 19:33:56 Desc Main Document Page 1 of 56

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on	Arley	
picture identification example, your drive	your government-issued picture identification (for example, your driver's	First name	First name
	license or passport).	Middle name	Middle name
	Bring your picture	Silvestre	
identification to your meeting with the trustee.		Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-9742	

Entered 06/26/18 19:33:56 Page 2 of 56 Case 18-18149 Doc 1 Filed 06/26/18 Desc Main

Debtor 1 Arley Silvestre

Document Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names		■ I have not used any business name or EINs. Business name(s)	☐ I have not used any business name or EINs. Business name(s) EINs		
		LINS	LIIVS		
5.	Where you live	2732 N. Fairfield Ave.	If Debtor 2 lives at a different address:		
		Chicago, IL 60647 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		Cook			
		County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing	Check one:	Check one:		
	this district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		

Entered 06/26/18 19:33:56 Desc Main Page 3 of 56 Case 18-18149 Doc 1 Filed 06/26/18

Document Case number (if known) Debtor 1 Arley Silvestre

7.	The chapter of the Bankruptcy Code you are				ach, see <i>Notice Required by</i> e 1 and check the appropriate	11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy e box.		
	choosing to file under	■ C	hapter 7					
		_	hapter 11					
		_	hapter 12					
			hapter 13					
			.,					
3.	How you will pay the fee		about how yo	ou may pay. Typically attorney is submitting	, if you are paying the fee yo	k with the clerk's office in your local court for more details burself, you may pay with cash, cashier's check, or money alf, your attorney may pay with a credit card or check with		
				the fee in installme te in Installments (Off		option, sign and attach the Application for Individuals to Pay		
			I request that	it my fee be waived uired to, waive your f	(You may request this option fee, and may do so only if yo	n only if you are filing for Chapter 7. By law, a judge may, ur income is less than 150% of the official poverty line that n installments). If you choose this option, you must fill out		
						cial Form 103B) and file it with your petition.		
).	Have you filed for bankruptcy within the	■ No).					
	last 8 years?	☐ Ye						
			District			Case number		
			District		When	Case number		
			District		When	Case number		
0.	Are any bankruptcy cases pending or being	■ No)					
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	□ Ye	es.					
			Debtor			Relationship to you		
			District		When	Case number, if known		
			Debtor			Relationship to you		
			District		When	Case number, if known		
1.	Do you rent your residence?	■ No	Go to I	ine 12.				
	residerice:	□ Ye	es. Has yo	our landlord obtained	an eviction judgment agains	t you and do you want to stay in your residence?		
				No. Go to line 12.				
				Yes. Fill out Initial S	Statement About an Eviction	Judgment Against You (Form 101A) and file it with this		

Document Page 4 of 56 Case number (if known) Debtor 1 **Arley Silvestre** Part 3: Report About Any Businesses You Own as a Sole Proprietor Are you a sole proprietor No. of any full- or part-time Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure **Bankruptcy Code and are** you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). ☐ Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is alleged to pose a threat ☐ Yes. of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs immediate attention? needed, why is it needed?

Number, Street, City, State & Zip Code

Where is the property?

For example, do you own perishable goods, or livestock that must be fed,

or a building that needs urgent repairs?

Debtor 1 Arley Silvestre Document Page 5 of 56 Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 18-18149 Doc 1 Filed 06/26/18 Entered 06/26/18 19:33:56 Desc Main Document Page 6 of 56

Deb	tor 1 Arley Silvestre		Document	raye 0 01 30	Case number (if know)	n)		
Part		ions for Re	eportina Purposes					
	What kind of debts do you have?	16a.				1 U.S.C. § 101(8) as "incurred by an		
			☐ No. Go to line 16b.					
			Yes. Go to line 17.					
		16b.	Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.					
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you owe that	at are not consumer deb	ots or business debts			
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7. Go	to line 18.				
	Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	■ Yes.	are paid that funds will be available			excluded and administrative expenses		
			No					
			☐ Yes					
18.	How many Creditors do	1 -49		□ 1,000-5,000		l 25,001-50,000		
	you estimate that you owe?	☐ 50-99		□ 5001-10,000		50,001-100,000		
		☐ 100-19 ☐ 200-99		□ 10,001-25,000		l More than100,000		
19.	How much do you	= \$0 - \$9	50,000	□ \$1,000,001 - \$10 m	nillion \Box	1 \$500,000,001 - \$1 billion		
	estimate your assets to be worth?	□ \$50,001 - \$100,000		□ \$10,000,001 - \$50	million \Box	1 \$1,000,000,001 - \$10 billion		
			001 - \$500,000 001 - \$1 million	□ \$50,000,001 - \$100 □ \$100,000,001 - \$50		1 \$10,000,000,001 - \$50 billion 1 More than \$50 billion		
20.	How much do you	□ \$0 - \$ <u>\$</u>		□ \$1,000,001 - \$10 m	sillion F	\$500,000,001 - \$1 billion		
_0.	estimate your liabilities		01 - \$100,000	□ \$10,000,001 - \$10 II		\$1,000,000,001 - \$1 billion		
	to be?	□ \$100,0	001 - \$500,000	\$50,000,001 - \$100		\$10,000,000,001 - \$50 billion		
		□ \$500,0	001 - \$1 million	□ \$100,000,001 - \$50	00 million L	More than \$50 billion		
Part	7: Sign Below							
For	you	I have ex	amined this petition, and I declare u	nder penalty of perjury	that the information p	rovided is true and correct.		
			chosen to file under Chapter 7, I am ates Code. I understand the relief av					
			ney represents me and I did not pay t, I have obtained and read the notic			orney to help me fill out this		
		I request	relief in accordance with the chapte	r of title 11, United State	es Code, specified in	this petition.		
		bankrupto and 3571				rty by fraud in connection with a both. 18 U.S.C. §§ 152, 1341, 1519,		
		Arley Si	/ Silvestre Ivestre e of Debtor 1	Signa	ture of Debtor 2			
		Executed	on June 26, 2018	Execu	uted on			
			MM / DD / YYYY		MM / DD / Y	YYYY		

Case 18-18149 Doc 1 Filed 06/26/18 Entered 06/26/18 19:33:56 Desc Main Document Page 7 of 56

Debtor 1 Arley Silvestre Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Celetha Chatman	Date	June 26, 2018
Signature of Attorney for Debtor		MM / DD / YYYY
Celetha Chatman Printed name		
Community Lawyers Group, Ltd.		
Firm name		
73 W. Monroe, Suite 502		
Chicago, IL 60603		
Number, Street, City, State & ZIP Code		
Contact phone 312-561-5516	Email address	cchatman@communitylawyersgroup.
Bar number & State		<u> </u>

		Docume	ent Page 8 of 56	
Fill in this infor	mation to identify your	case:		
Debtor 1	Arley Silvestre			
	First Name	Middle Name	Last Name	
Debtor 2				
Spouse if, filing)	First Name	Middle Name	Last Name	
Jnited States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
if known)				☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Pai	t 1: Summarize Your Assets		
		Your as	ssets f what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	4,990.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	4,990.00
Pai	t 2: Summarize Your Liabilities		
			abilities you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	50,994.36
	Your total liabilities	\$	50,994.36
Pai	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,055.71
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,060.00
Pai	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sch	edules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a	a personal,	family, or

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

the court with your other schedules.

Filed 06/26/18 Entered 06/26/18 19:33:56 Desc Main Case 18-18149 Doc 1 Document

Page 9 of 56 Case number (if known) Debtor 1 Arley Silvestre

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

2,302.00 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Ci	ase 18-18149	Doc 1 Filed 06/2		8 19:33:56	Jesc Main
Fill in this infor	mation to identify your	case and this filing:	ent Page 10 of 56		
Debtor 1	Arley Silvestre	<u> </u>			
Dobtor 1	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		
	ankruptcy Court for the:	NORTHERN DISTRICT (
Officed States De	ankruptcy Court for the.	NORTHERN BIOTRIOT	OI ILLINOIO		
Case number					☐ Check if this is an amended filing
					3
Official Fo	orm 106A/B				
	le A/B: Prop	ortv			40/45
	_		nce. If an asset fits in more than one	category list the ass	12/15
hink it fits best. I	Be as complete and accura	ate as possible. If two marrie	d people are filing together, both are on. On the top of any additional pages,	equally responsible for	or supplying correct
Answer every que		a separate sneet to this for	ii. On the top of any additional pages,	write your name and	case number (ii known).
Part 1: Describe	Each Residence, Building	g, Land, or Other Real Estate	You Own or Have an Interest In		
. Do you own or	have any legal or equitabl	e interest in any residence, b	ouilding, land, or similar property?		
■ No. Go to Pa	t 0				
Yes. Where					
	,				
Part 2: Describe	Your Vehicles				
			nicles, whether they are registeredule G: Executory Contracts and Une		y vehicles you own that
3. Cars, vans, t	rucks, tractors, sport u	tility vehicles, motorcycle	es		
■ No					
☐ Yes					
			nal vehicles, other vehicles, and a sels, snowmobiles, motorcycle acce		
■ No					
☐ Yes					
	ar value of the neution	vou our for all of vour or	strice from Bort 2, including any	antrice for	
	<u>-</u>	-	ntries from Part 2, including any e		\$0.00
				L	
	Your Personal and Hous	ehold Items able interest in any of the	a following items?		Current value of the
Do you own or	nave any legal of equil	able interest in any or the	tollowing terms:		portion you own? Do not deduct secured claims or exemptions.
	oods and furnishings	P 12 12 1			ciains of exemptions.
Examples: M ☐ No	ajor appliances, furniture	e, linens, china, kitchenware	9		
Yes. Desc	cribe				
	1x dresse 1x queen				
	1x nights				\$150.00

Official Form 106A/B Schedule A/B: Property page 1

	Case 18-1814	49 Doc 1	Filed 06/26/18	Entered 06/26/18 19:3	3:56 Desc Main	
Debtor 1	Arley Silvestre		Document	Page 11 of 56 Case number ((if known)	
□ No				oment; computers, printers, scanners;	; music collections; electronic de	vices
	1x I 1x I 1x c 1x i 1x a	47" Vizio LCD T LG Speaker sys MacBook pro La computer moni Pad applewatch Phone	stem aptop		\$6	600.00
Examp ■ No	ibles of value les: Antiques and figurir other collections, m			oks, pictures, or other art objects; star	mp, coin, or baseball card collec	tions;
Examp	musical instrument	ic, exercise, and o s		picycles, pool tables, golf clubs, skis;		ools;
-	201	4 Fixed Gear B	ike		⊅	100.00
■ No □ Yes.	ples: Pistols, rifles, shot Describe		, and related equipment			
Yes.	Describe					
	Jea Swe Sho Shi	eaters pes				\$25.00
■ No	•	costume jewelry,	engagement rings, wedd	ding rings, heirloom jewelry, watches	s, gems, gold, silver	
Exam ■ No	arm animals ples: Dogs, cats, birds, Describe	horses				
		sehold items you	ı did not already list, ir	ncluding any health aids you did n	ot list	
	Give specific informati	on				
			om Part 3, including a	ny entries for pages you have attao	ched \$875	.00

Official Form 106A/B

Case 18-18149 Doc 1 Filed 06/26/18 Entered 06/26/18 19:33:56

Desc Main Page 12 of 56

Case number (if known) Document Debtor 1 **Arley Silvestre** Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ☐ Yes.... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: Yes..... \$540.00 **TCF Bank** 17.1. Checking GoBank \$0.00 17.2. Checking 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No ☐ Yes..... Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ■ No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ■ No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No

☐ Yes. Institution name or individual:

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

■ No Issuer name and description. ☐ Yes.....

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes.....

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

No

		Case 18-1814	9 Doc 1	Filed 06/26/18 Document	Entered 06/26 Page 13 of 56	6/18 19:33:56	Desc Main
Debto	or 1	Arley Silvestre		Document		ase number (if known)	
	Yes.	Give specific informatio	n about them.				
_E	xamp			crets, and other intellectu , proceeds from royalties a		s	
	No Yes.	Give specific informatio	n about them.				
E	xamp No		clusive licens	es, cooperative association	n holdings, liquor licens	es, professional licens	es
Ц	Yes.	Give specific informatio	n about them.				
Mone	y or	property owed to you?					Current value of the portion you own? Do not deduct secured claims or exemptions.
	ax ref No	unds owed to you					
_		Give specific information	n about them,	including whether you alre	ady filed the returns and	the tax years	
			20	17 Tax Refund		Federal	\$2,575.00
31. In	No Yes. teres xamp	benefits; unpaid loading Give specific information its in insurance policies: Health, disability, or	ability insurance ans you made n s Iffe insurance	ee payments, disability ben to someone else e; health savings account (
Ī	163.		ompany name		Beneficiary	<i>r</i> :	Surrender or refund value:
lf s ■	you a omed No		iving trust, exp	om someone who has die pect proceeds from a life in		urrently entitled to rec	eive property because
	xamp No		nent disputes,	ot you have filed a lawsu insurance claims, or rights		or payment	
			Silve	estre, Arley v. Midland	Funding (FDCPA)		\$1,000.00
	No	contingent and unliquide		of every nature, includin	g counterclaims of the	e debtor and rights to	set off claims

Official Form 106A/B Schedule A/B: Property page 4

Case 18-18149 Doc 1 Filed 06/26/18 Entered 06/26/18 19:33:56 Desc Main Page 14 of 56

Case number (if known) Document Debtor 1 **Arley Silvestre** 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$4,115.00 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. Part 6 If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ■ No ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 \$0.00 56. Part 2: Total vehicles, line 5 \$0.00 57. Part 3: Total personal and household items, line 15 \$875.00 Part 4: Total financial assets, line 36 \$4,115.00 Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 61. \$0.00 Total personal property. Add lines 56 through 61... Copy personal property total \$4,990.00 \$4,990.00

Official Form 106A/B Schedule A/B: Property page 5

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$4,990.00

		17/1/11111		
Fill in this inform	nation to identify your	case:		
Debtor 1	Arley Silvestre			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				Check if
				amende

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	unt of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Chec	sk only one box for each exemption.	
Jeans Sweaters	\$25.00	•	\$25.00	735 ILCS 5/12-1001(a)
Shoes Shirts Line from Schedule A/B: 11.1		☐ 100% of fair market value, up any applicable statutory limit		
Checking: TCF Bank Line from Schedule A/B: 17.1	\$540.00		\$425.00	735 ILCS 5/12-1001(b)
Line IIoiii Schedule AVD. 1111			100% of fair market value, up to any applicable statutory limit	
Checking: TCF Bank Line from Schedule A/B: 17.1	\$540.00		\$0.00	735 ILCS 5/12-1001(b)
			100% of fair market value, up to any applicable statutory limit	
Federal: 2017 Tax Refund Line from Schedule A/B: 28.1	\$2,575.00		\$2,575.00	735 ILCS 5/12-1001(b)
			100% of fair market value, up to any applicable statutory limit	
Silvestre, Arley v. Midland Funding (FDCPA)	\$1,000.00	•	\$1,000.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 33.1			100% of fair market value, up to any applicable statutory limit	

Case 18-18149 Doc 1 Filed 06/26/18 Entered 06/26/18 19:33:56 Desc Main Document Page 16 of 56 Case number (if known)

3. Are you claiming a homestead exemption of more than \$160,375?
(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

No

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

No

Yes

		1211111	· · · · · · · · · · · · · · · · · · ·	
Fill in this infor	mation to identify your	case:		
Debtor 1	Arley Silvestre			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this i
				amended filin

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

	0000 10 10140 1	Document	Page 18	3 of 56	.oo Beso Maii	
Fill in this in	nformation to identify your					
Debtor 1	Arley Silvestre					
	First Name	Middle Name	Last Name			
Debtor 2	First Name	Middle Nieses	L and Manna			
(Spouse if, filing)) First Name	Middle Name	Last Name			
United State	s Bankruptcy Court for the:	NORTHERN DISTRICT OF ILL	INOIS			
Case numbe	er					
(if known)					☐ Check if this is an	
					amended filing	
Official F	orm 106E/F					
		ho Have Unsecured	Claims		12/15	
				Part 2 for creditors with NON	IPRIORITY claims. List the other party	to
Schedule G: E Schedule D: C left. Attach the	Executory Contracts and Unexp Creditors Who Have Claims Sec	ired Leases (Official Form 106G). D ured by Property. If more space is ı	o not include a needed, copy t	any creditors with partially s he Part you need, fill it out,	Property (Official Form 106A/B) and or secured claims that are listed in number the entries in the boxes on th op of any additional pages, write your	е
	ist All of Your PRIORITY Un					_
	reditors have priority unsecure	d claims against you?				
	o to Part 2.					
☐ Yes.						
	ist All of Your NONPRIORIT					_
3. Do any c	reditors have nonpriority unsec	ured claims against you?				
☐ No. Yo	ou have nothing to report in this p	art. Submit this form to the court with	your other sche	dules.		
Yes.						
unsecure	d claim, list the creditor separately		, identify what ty	ype of claim it is. Do not list cla	or has more than one nonpriority aims already included in Part 1. If more laims fill out the Continuation Page of	
					Total claim	
	nor System Corp.	Last 4 digits of acc	ount number	7792	\$500.0	0
- 1	oriority Creditor's Name 0 Kiefer Dr. Suite 1	When was the debt	incurred?			
_	n, IL 60099	When was the debt	incurred:			
	ber Street City State Zlp Code	As of the date you t	ile, the claim is	s: Check all that apply		
Who	incurred the debt? Check one.					
■ D	ebtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
ПА	at least one of the debtors and and	_	ITY unsecured	I claim:		
	Check if this claim is for a comm	<u> </u>				
debt	e claim subject to offset?	Obligations arisin report as priority clain		ration agreement or divorce th	nat you did not	
■ N	-	' ' '		g plans, and other similar deb	ts	
ЦΥ	es	Other. Specify				

Document Page 19 of 56 Debtor 1 Arley Silvestre Case number (if know) \$500.00 4.2 ARMOR SYSTEMS CORP Last 4 digits of account number 0293 Nonpriority Creditor's Name 1700 KIEFER DR STE 1 When was the debt incurred? Zion, IL 60099 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collection Agency ☐ Yes 4.3 **Barclays Bank Delaware** Last 4 digits of account number 1126 \$2,482.00 Nonpriority Creditor's Name 125 South West Street When was the debt incurred? Wilmington, DE 19801 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No **Bank/Credit Union/Financial Services** ☐ Yes Other. Specify Provider 4.4 Capital One Bank USA NA Last 4 digits of account number 9183 \$812.00 Nonpriority Creditor's Name PO Box 30281 When was the debt incurred? Salt Lake City, UT 84130 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not

■ No

☐ Yes

report as priority claims

■ Other. Specify Credit Provider

 \square Debts to pension or profit-sharing plans, and other similar debts

Is the claim subject to offset?

Case 18-18149 Doc 1 Filed 06/26/18 Entered 06/26/18 19:33:56 Desc Main Document Page 20 of 56

Debtor 1 Arley Silvestre Case number (if know) 4.5 \$291.00 **Chase Bank** Last 4 digits of account number 3050 Nonpriority Creditor's Name **Cardmember Service** When was the debt incurred? PO BOX 15548 Wilmington, DE 19886 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No **Bank/Credit Union/Financial Services** ■ Other. Specify Provider ☐ Yes 4.6 Client Services, Incorporated \$812.00 Last 4 digits of account number 1337 Nonpriority Creditor's Name Saint Charles, MO When was the debt incurred? Saint Charles, MO 63301 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection Agency ☐ Yes 4.7 COM Ed Last 4 digits of account number 3060 \$288.00 Nonpriority Creditor's Name **PO BOX 5228** When was the debt incurred? Hinsdale, IL 60522 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No Other. Specify Utilities ☐ Yes

Case 18-18149 Doc 1 Filed 06/26/18 Entered 06/26/18 19:33:56 Desc Main Document Page 21_of 56

Debtor 1 Arley Silvestre Case number (if know) 4.8 **Discover Financial Services** \$1,162.00 Last 4 digits of account number 2133 Nonpriority Creditor's Name PO Box 15316 When was the debt incurred? Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Provider ☐ Yes 4.9 **DSNB/Macys** Last 4 digits of account number 8199 Unknown Nonpriority Creditor's Name Po Box 8218 When was the debt incurred? Mason, OH 45040 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No **Credit Provider** ☐ Yes Other. Specify 4.1 FEDERAL LOAN SERVICING 8FD0 \$900.00 Last 4 digits of account number 0 Nonpriority Creditor's Name PO BOX 60610 When was the debt incurred? Harrisburg, PA 17106 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

■ Other. Specify Lender/Loan Provider

Case 18-18149 Doc 1 Filed 06/26/18 Entered 06/26/18 19:33:56 Desc Main Page 22 of 56 Case number (if know) Document Debtor 1 Arley Silvestre 4.1 \$1,100.00 FEDERAL LOAN SERVICING 8FD0 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO BOX 60610 Harrisburg, PA 17106 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Education ☐ Yes 4.1 FEDERAL LOAN SERVICING 8FD0 \$3,400.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 60610 When was the debt incurred? Harrisburg, PA 17106 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply

☐ Contingent							
☐ Contingent							
☐ Debtor 2 only ☐ Unliquidated							
☐ Debtor 1 and Debtor 2 only ☐ Disputed							
Type of NONPRIORITY unsecured claim:							
☐ Student loans							
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims							
lacktriangle Debts to pension or profit-sharing plans, and other similar debts							
Other. Specify Education							
Last 4 digits of account number 8FD0	\$2,062.00						
When we the debt in some 40							
when was the debt incurred?							
As of the date you file, the claim is: Check all that apply							
☐ Contingent							
☐ Unliquidated							
☐ Disputed							
Type of NONPRIORITY unsecured claim:							
☐ Student loans							
☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims							
\square Debts to pension or profit-sharing plans, and other similar debts							
■ Other. Specify Education							
	□ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify						

4.1 3

Page 23 of 56 Case number (if know) Document Debtor 1 Arley Silvestre

FEDERAL LOAN SERVICING	Last 4 digits of account number 8FD0	\$700.00			
Nonpriority Creditor's Name PO BOX 60610	When was the debt incurred?				
Harrisburg, PA 17106					
Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply				
Who incurred the debt? Check one.					
Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	☐ Disputed				
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
☐ Check if this claim is for a community	☐ Student loans				
debt s the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims				
No	\square Debts to pension or profit-sharing plans, and other similar debts				
Yes	Other. Specify Education				
FEDERAL LOAN SERVICING	Last 4 digits of account number 8FD0	\$5,500.00			
Nonpriority Creditor's Name PO BOX 60610 Harrisburg, PA 17106	When was the debt incurred?				
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
Debtor 1 only	☐ Contingent				
Debtor 2 only	□ Unliquidated				
☐ Debtor 1 and Debtor 2 only	□ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
☐ Check if this claim is for a community	☐ Student loans				
ebt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
No	☐ Debts to pension or profit-sharing plans, and other similar debts				
☐Yes	Other. Specify Education				
FEDERAL LOAN SERVICING	Last 4 digits of account number 8FD0	\$5,500.00			
Nonpriority Creditor's Name					
PO BOX 60610	When was the debt incurred?				
Harrisburg, PA 17106 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
Who incurred the debt? Check one.					
Debtor 1 only	☐ Contingent				
☐ Debtor 2 only	☐ Unliquidated				
☐ Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
☐ Check if this claim is for a community					
debt s the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	■ Other Specify Education				

Case 18-18149 Doc 1 Filed 06/26/18 Entered 06/26/18 19:33:56 Desc Main Document Page 24 of 56 Debtor 1 Arley Silvestre Case number (if know) 4.1 **FEDLOAN SERVICING** 8FD0 \$5,500.00 Last 4 digits of account number Nonpriority Creditor's Name **POB 60610** When was the debt incurred? Harrisburg, PA 17106 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Lender/Loan Provider ☐ Yes 4.1 Firstsource Advantage, LLC 9424 \$812.00 Last 4 digits of account number 8 Nonpriority Creditor's Name 205 Bryant Woods South When was the debt incurred? Buffalo, NY 14228 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collection Agency ☐ Yes 4.1 **Howard Brown Health Center** 0778 \$270.00 9 Last 4 digits of account number Nonpriority Creditor's Name 415 W. Golf Road When was the debt incurred? Suite 16 Arlington Heights, IL 60005 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent

☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical/Dental/Health Services ☐ Yes

Case 18-18149 Doc 1 Filed 06/26/18 Entered 06/26/18 19:33:56 Desc Main Document Page 25 of 56

Page 25 of 56 Debtor 1 Arley Silvestre Case number (if know) 4.2 Lendup 1540 \$326.00 Last 4 digits of account number 0 Nonpriority Creditor's Name 47 Maiden LN FL. 3 When was the debt incurred? San Francisco, CA 94108 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Lender/Loan Provider ☐ Yes 4.2 LTd Financial Services Limited Par 5511 Last 4 digits of account number \$4,055.00 Nonpriority Creditor's Name 7322 Southwest Freeway, Suite When was the debt incurred? 1600 Houston, TX 77074 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collection Agency ☐ Yes 4.2 Midland Funding LLC 7519 \$2,287.00 Last 4 digits of account number Nonpriority Creditor's Name 8875 Aero Drive When was the debt incurred? Suite 200 San Diego, CA 92123 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

■ No

☐ Yes

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify Collection Agency

Document Page 26 of 56 Debtor 1 Arley Silvestre Case number (if know) 4.2 MiraMed Revenue Group, LLC 5521 \$150.00 Last 4 digits of account number 3 Nonpriority Creditor's Name When was the debt incurred? Dept. 77304 P.O. Box 77000 Detroit, MI 48277 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collection Agency ☐ Yes 4.2 **Paypal Credit** 8315 \$2,208.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 105658 When was the debt incurred? Atlanta, GA 30348 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Provider ☐ Yes 4.2 People's Gas 0001 \$886.36 Last 4 digits of account number Nonpriority Creditor's Name **Bankruptcy Department** When was the debt incurred? 130 E. Randolph Drive. Chicago, IL 60601 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim:

debt

■ No

☐ Yes

 \square Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

☐ Student loans

report as priority claims

■ Other. Specify Utilities

At least one of the debtors and another

Is the claim subject to offset?

☐ Check if this claim is for a community

Case 18-18149 Doc 1 Filed 06/26/18 Entered 06/26/18 19:33:56 Desc Main Page 27 of 56 Case number (if know) Document Debtor 1 Arley Silvestre 4.2 Portfolio Recovery Associates, LLC 1577 \$1,101.00 Last 4 digits of account number 6 Nonpriority Creditor's Name **Riverside Commerce Center** When was the debt incurred? 120 Corporate Blvd Ste. 100 Norfolk, VA 23502 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Collection Agency 4.2 **Presence Health** 7653 \$150.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 74008843 When was the debt incurred? Chicago, IL 60674 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical/Dental/Health Services ☐ Yes 4.2 Presence Saints Mary Med Ctr 5521 \$150.00 8 Last 4 digits of account number Nonpriority Creditor's Name

33368 Collection Center Dr. When was the debt incurred? Chicago, IL 60693 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical/Dental/Health Services ☐ Yes

Case 18-18149 Doc 1 Filed 06/26/18 Entered 06/26/18 19:33:56 Desc Main Document Page 28 of 56

Page 28 of 56 Debtor 1 Arley Silvestre Case number (if know) 4.2 **RGS Collections, Inc.** 9586 \$2,656.00 Last 4 digits of account number 9 Nonpriority Creditor's Name 1700 Jay Ell Dr. When was the debt incurred? Suite 200 Richardson, TX 75081 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Collection Agency 4.3 SCH Laboratory Physicians, SC 1607 \$68.00 Last 4 digits of account number 0 Nonpriority Creditor's Name When was the debt incurred? 5700 Southwyck Blvd. Toledo, OH 43614 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical/Dental/Health Services ☐ Yes 4.3 SCH Laboratory Physicians, SC 3642 \$479.00 Last 4 digits of account number Nonpriority Creditor's Name 5700 Southwyck Blvd. When was the debt incurred? Toledo, OH 43614 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

■ Other. Specify Medical/Dental/Health Services

Case 18-18149 Doc 1 Filed 06/26/18 Entered 06/26/18 19:33:56 Desc Main Document Page 29 of 56

1 Arley Silvestre	Case number (if know)					
Swedish Covenant Hospital	Last 4 digits of account number 7076	\$500.00				
Nonpriority Creditor's Name 5145 N. California Ave.	When was the debt incurred?	••••				
Chicago, IL 60625 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply					
Who incurred the debt? Check one.	The state year may and statem to strook all that apply					
■ Debtor 1 only	☐ Contingent					
Debtor 2 only	☐ Unliquidated					
☐ Debtor 1 and Debtor 2 only	☐ Disputed					
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
☐ Check if this claim is for a community	☐ Student loans					
debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
■ No	\square Debts to pension or profit-sharing plans, and other similar debts					
Yes	■ Other. Specify Medical/Dental/Health Services					
SYNCB/AMAZON PLCC	Last 4 digits of account number 3168	\$2,286.00				
Nonpriority Creditor's Name PO BOX 965015	When was the debt incurred?	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
Orlando, FL 32896 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply					
Who incurred the debt? Check one.	The of the date you may the damin of officer all that apply					
■ Debtor 1 only	☐ Contingent					
Debtor 2 only	☐ Unliquidated					
☐ Debtor 1 and Debtor 2 only	□ Disputed					
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
☐ Check if this claim is for a community	☐ Student loans					
debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts					
Yes	Other. Specify Credit Provider					
SYNCB/OLDNAVYDC	Last 4 digits of account number 1577	\$1,101.00				
Nonpriority Creditor's Name PO BOX 965005	When was the debt incurred?					
Orlando, FL 32896 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply					
Who incurred the debt? Check one.	As of the date you me, the claim is. Oneon an that apply					
■ Debtor 1 only	☐ Contingent					
Debtor 2 only	☐ Unliquidated					
Debtor 1 and Debtor 2 only	☐ Disputed					
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
☐ Check if this claim is for a community	☐ Student loans					
debt	\square Obligations arising out of a separation agreement or divorce that you did not					
Is the claim subject to offset?	report as priority claims					
No	☐ Debts to pension or profit-sharing plans, and other similar debts					
Yes	Other. Specify Credit Provider					

Part 3: List Others to Be Notified About a Debt That You Already Listed

Part 4: Add the Amounts for Each Type of Unsecured Claim

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Entered 06/26/18 19:33:56 Desc Main Case 18-18149 Doc 1 Filed 06/26/18 Page 30 of 56 Case number (if know) Document

Debtor 1 Arley Silvestre

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

From Part 1 6a. Domestic support obligations 6a. \$ Claims from Part 1 6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6d. Other. Add all other priority unsecured claims. Write that amount here. 6d. \$	0.00
claims from Part 1 6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6c. \$	
from Part 1 6b. Taxes and certain other debts you owe the government 6b. \$ 6c. Claims for death or personal injury while you were intoxicated 6c. \$	
6c. Claims for death or personal injury while you were intoxicated 6c. \$	
	0.00
	0.00
6d. Other. Add all other priority unsecured claims. Write that amount here. 6d. \$	0.00
6e. Total Priority. Add lines 6a through 6d. 6e. \$	0.00
To	otal Claim
6f. Student loans 6f. \$	0.00
Total claims	
from Part 2 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6g. \$	0.00
6h. Debts to pension or profit-sharing plans, and other similar debts 6h. \$	0.00
6i. Other. Add all other nonpriority unsecured claims. Write that amount 6i.	50,994.36
here. \$	
6j. Total Nonpriority. Add lines 6f through 6i.	50,994.36

		1700.000	111 FAUE 31 01 30	
Fill in this information	to identify your	case:		
Debtor 1 Ari	ley Silvestre			
First	Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing) First	Name	Middle Name	Last Name	
United States Bankrupto	cy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company wit Name, Numb	h whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			
	City		State	ZIP Code	
2.2					_
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.3			Otato		
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
	Jity		Oldic		

		Docume	ent Page 32 d	ot 56	
Fill in th	is information to identify your	case:			
Debtor 1	Arloy Silvestre				
Debtor 1	Arley Silvestre First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, t		Middle Name	Last Name		
United S	tates Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case nui	mber				_ 0
(if known)					Check if this is an
					amended filing
Officia	al Form 106H				
		lalatana			
Scne	dule H: Your Cod	eptors			12/15
people ar	re filing together, both are equ	ially responsible for supper boxes on the left. Attach	olying correct information the Additional Page (tion. If more space is n	ate as possible. If two married needed, copy the Additional Page, no of any Additional Pages, write
1. De	o you have any codebtors? (If	you are filing a joint case,	do not list either spouse	e as a codebtor.	
■ N	0				
<u></u>	53				
	ithin the last 8 years, have yo ona, California, Idaho, Louisiana				y states and territories include
■ N	o. Go to line 3.				
_	es. Did your spouse, former spo	use, or legal equivalent live	e with you at the time?		
	. , , , , , , , , , , , , , , , , , , ,	3	, , , , , , , , , , , , , , , , , , , ,		
in lir Forn	ne 2 again as a codebtor only	if that person is a guaran	tor or cosigner. Make	sure you have listed th	g with you. List the person shown ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and 2	IP Code		Column 2: The cre Check all schedule	editor to whom you owe the debt es that apply:
0.4				По	
3.1	Name			Schedule D, line	
				☐ Schedule E/F, I☐ Schedule G, lin	
				□ Schedule G, IIn	e
	Number Street			<u> </u>	
	City	State	ZIP Code		
3.2				☐ Schedule D, line	
0.2	Name			□ Schedule E/F, I	
				☐ Schedule C, lin	
	-				<u> </u>
	Number Street City	State	ZIP Code		
	,		0000		

Case 18-18149 Doc 1 Filed 06/26/18 Entered 06/26/18 19:33:56 Desc Main Document Page 33 of 56

Fill	in this information to identify your ca	350.						
	otor 1 Arley Silves							
	otor 2 ouse, if filing)				-			
Uni	ted States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS					
(If kr	fficial Form 106l							
	chedule I: Your Inc	omo			N	ИМ / DD/ Y	YYYY	12/15
sup spo atta	as complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	are married and not filing wi	ng jointly, and your sp th you, do not include	ouse is informa	living with ation abou	you, incl t your spo	ude information ouse. If more sp	about your ace is needed,
1.	Fill in your employment information.		Debtor 1			Debtor 2	2 or non-filing s _l	oouse
	If you have more than one job, attach a separate page with information about additional employers.	Employment status	■ Employed			☐ Employed		
			☐ Not employed			☐ Not e	mployed	
	Include part-time, seasonal, or	Occupation	HIV Outreach Wo					
	self-employed work.	Employer's name	Rincon Family Services					
	Occupation may include student or homemaker, if it applies.	Employer's address	3942 W North Ave Chicago, IL 60647					
		How long employed the	here? 3 months	5		_		
Par	Give Details About Mor	nthly Income						
	mate monthly income as of the dause unless you are separated.	ate you file this form. If	you have nothing to rep	ort for an	ny line, writ	e \$0 in the	space. Include y	our non-filing
	u or your non-filing spouse have mo e space, attach a separate sheet to		ombine the information	for all em	ployers for	that perso	on on the lines be	low. If you need
					For De	btor 1	For Debtor 2 non-filing spo	
2.	List monthly gross wages, sala deductions). If not paid monthly, or			2.	\$2	2,331.33	\$	N/A
3.	Estimate and list monthly overti	ime pay.		3. +	-\$	0.00	+\$	N/A

Calculate gross Income. Add line 2 + line 3.

\$ 2,331.33

N/A

Case 18-18149 Doc 1 Filed 06/26/18 Entered 06/26/18 19:33:56 Desc Main Document Page 34 of 56

Debt	or 1	Arley Silvestre		C	Case nu	ımber (<i>if kr</i>	nown)				
					For D	ebtor 1			Debtor		
	Con	y line 4 here	4.		\$	2,331	22	non-	-filing s	pouse N/A	
	Cop	y line 4 nere	4.		Ψ	2,331	.33	Ψ		N/A	
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a.		\$	405	5.62	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b.		\$		0.00	\$		N/A	
	5c.	Voluntary contributions for retirement plans	5c.		\$		0.00	\$		N/A	-
	5d. 5e.	Required repayments of retirement fund loans Insurance	5d. 5e.		\$		0.00	\$_ \$		N/A	
	5f.	Domestic support obligations	5f.		\$ 		0.00	\$ 		N/A N/A	
	5g.	Union dues	5g.		\$		0.00	\$_		N/A	-
	5h.	Other deductions. Specify:	5h.		\$			+ \$		N/A	•
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	_ 6.		\$	405	5.62	\$		N/A	
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	1,925		\$		N/A	
8.		all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total			`	.,,	<u></u>	·			
		monthly net income.	8a.		\$		0.00	\$		N/A	-
	8b.	Interest and dividends	8b.		\$		0.00	\$		N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.		\$		0.00	\$		N/A	
	8d.	Unemployment compensation	8d.		\$—		0.00	\$—		N/A	
	8e.	Social Security	8e.		\$		0.00	\$_		N/A	-
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.		\$	C	0.00	\$		N/A	
	8g.	Pension or retirement income	8g.		\$		0.00	\$		N/A	
	8h.	Other monthly income. Specify: Postmates	_ 8h.	.+	\$		5.00	. —		N/A	
		UberEats	_		\$	65	5.00	\$		N/A	<u>. </u>
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	S	130	0.00	\$		N/A	<u> </u>
10.	Cald	culate monthly income. Add line 7 + line 9.	10.	\$	2.	055.71	+ \$		N/A	= \$	2,055.71
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		_							,
11.	Inclu othe	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a cify:	depe						Schedule 11.		0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rest e that amount on the Summary of Schedules and Statistical Summary of Certain ies							12.	\$Combin	2,055.71
	_		_								y income
13.	Do y	you expect an increase or decrease within the year after you file this form? No. Yes. Explain:	′								

Case 18-18149 Doc 1 Filed 06/26/18 Entered 06/26/18 19:33:56 Desc Main Document Page 35 of 56

Fillia	in this information to identify your case:		I		
Debte			Oh a el	r if this is:	
Debte	Arley Silvestre			if this is: An amended filing	
Debto	tor 2 buse, if filing)				ving postpetition chapter the following date:
` .			_		
Unite	ed States Bankruptcy Court for the: NORTHERN DISTRICT OF ILL	INOIS	V	/M / DD / YYYY	
1	e number nown)				
Of	fficial Form 106J				
	chedule J: Your Expenses				12/1
info	as complete and accurate as possible. If two married people ormation. If more space is needed, attach another sheet to th nber (if known). Answer every question.				
Part					
1.	Is this a joint case?				
	■ No. Go to line 2. ☐ Yes. Does Debtor 2 live in a separate household?				
	□ No				
	☐ Yes. Debtor 2 must file Official Form 106J-2, Expens	ses for Separate House	ehold of Debto	or 2.	
2.	Do you have dependents? ■ No				
	Do not list Debtor 1 and Debtor 2. Sill out this information for each dependent	•		Dependent's age	Does dependent live with you?
	Do not state the				□ No
	dependents names.				☐ Yes ☐ No
					☐ Yes
					□ No
					☐ Yes
					□ No □ Yes
3.	Do your expenses include ■ No				□ 163
	expenses of people other than yourself and your dependents?				
Dort	t 2: Estimate Your Ongoing Monthly Expenses				
Esti	imate your expenses as of your bankruptcy filing date unles enses as of a date after the bankruptcy is filed. If this is a sublicable date.				
the v	lude expenses paid for with non-cash government assistand value of such assistance and have included it on Schedule ficial Form 106l.)			Your exp	enses
			_		
4.	The rental or home ownership expenses for your residence payments and any rent for the ground or lot.	e. Include first mortgag	e 4. \$		1,000.00
	If not included in line 4:				
	4a. Real estate taxes		4a. \$		0.00
	4b. Property, homeowner's, or renter's insurance		4b. \$		0.00
	4c. Home maintenance, repair, and upkeep expenses4d. Homeowner's association or condominium dues		4c. \$ 4d. \$		0.00
5.	Additional mortgage payments for your residence, such as	home equity loans	4a. \$ 5. \$		0.00

Case 18-18149 Doc 1 Filed 06/26/18 Entered 06/26/18 19:33:56 Desc Main Document Page 36 of 56

Debtor 1	Arley Silvestre	Case num	ber (if known)	
6. Utiliti	es:			
6a.	Electricity, heat, natural gas	6a.	\$	200.00
6b.	Water, sewer, garbage collection	6b.	\$	40.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	220.00
6d.	Other. Specify:	6d.	\$	0.00
7. Food	and housekeeping supplies		\$	400.00
8. Child	care and children's education costs	8.	\$	0.00
9. Cloth	ing, laundry, and dry cleaning	9.	\$	30.00
10. Perso	onal care products and services	10.	\$	30.00
11. Medi	cal and dental expenses	11.	\$	0.00
	sportation. Include gas, maintenance, bus or train fare.			
	t include car payments.	12.	\$	100.00
13. Enter	tainment, clubs, recreation, newspapers, magazines, and books	13.	\$	40.00
14. Chari	table contributions and religious donations	14.	\$	0.00
15. Insur				
Do no	t include insurance deducted from your pay or included in lines 4 or 20.			
	Life insurance	15a.	·	0.00
15b.	Health insurance	15b.	\$	0.00
15c.	Vehicle insurance	15c.	\$	0.00
15d.	Other insurance. Specify:	15d.	\$	0.00
	5. Do not include taxes deducted from your pay or included in lines 4 or 20.			
Speci	<u>·</u>	16.	\$	0.00
	Iment or lease payments:	47	•	
	Car payments for Vehicle 1	17a.	·	0.00
	Car payments for Vehicle 2	17b.	·	0.00
	Other. Specify:	17c.	\$	0.00
	Other. Specify:	17d.	\$	0.00
8. Your	payments of alimony, maintenance, and support that you did not report as	18.	\$	0.00
	cted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I). payments you make to support others who do not live with you.	10.	\$	0.00
Speci		19.	Ψ	0.00
	real property expenses not included in lines 4 or 5 of this form or on <i>Sched</i>		our Income	
	Mortgages on other property	20a.		0.00
	Real estate taxes	20b.	·	0.00
	Property, homeowner's, or renter's insurance	20c.	·	0.00
	Maintenance, repair, and upkeep expenses	20d.	· ·	0.00
	Homeowner's association or condominium dues	20a. 20e.	·	
			·	0.00
1. Other	: Specify:	21.	+\$	0.00
2. Calcu	late your monthly expenses			
22a. /	Add lines 4 through 21.		\$	2,060.00
22b. (Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$,
	Add line 22a and 22b. The result is your monthly expenses.		\$	2,060.00
	, , , , , , , ,		<u> </u>	2,000.00
	late your monthly net income.			
	Copy line 12 (your combined monthly income) from Schedule I.	23a.	·	2,055.71
23b.	Copy your monthly expenses from line 22c above.	23b.	-\$	2,060.00
220	Cubiract your monthly avanage from your monthly income			
23C.	Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c.	\$	-4.29
	ou expect an increase or decrease in your expenses within the year after you			
	ample, do you expect to finish paying for your car loan within the year or do you expect your nation to the terms of your mortgage?	nortgage _l	payment to increas	e or decrease because of a
■ No).			
☐ Ye				

Case 18-18149 Doc 1 Filed 06/26/18 Entered 06/26/18 19:33:56 Desc Main Document Page 37 of 56

					1
Fill in this infor	mation to identify your	case:			
Debtor 1	Arley Silvestre				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRIC	T OF ILLINOIS		
Case number (if known)					☐ Check if this is an amended filing
Official Forr	m 106Dec				
Declarat	tion About a	an Individua	I Debtor's S	Schedules	12/15
years, or both. 1	y or property by fraud i 8 U.S.C. §§ 152, 1341, 1 n Below		nkruptcy case can resu	llt in fines up to \$250,0	00, or imprisonment for up to 20
Did you pa	y or agree to pay some	one who is NOT an atto	orney to help you fill ou	it bankruptcy forms?	
■ No					
☐ Yes. I	Name of person				nkruptcy Petition Preparer's Notice, n, and Signature (Official Form 119)
	alty of perjury, I declare e true and correct.	that I have read the sur	mmary and schedules f	filed with this declarati	on and
X /s/ Arle	ey Silvestre		X		
Arley	Silvestre are of Debtor 1		Signature	of Debtor 2	

Date _____

Date June 26, 2018

Case 18-18149 Doc 1 Filed 06/26/18 Entered 06/26/18 19:33:56 Desc Main Document Page 38 of 56

		nation to identify you	ır case:			
Del	btor 1	Arley Silvestre First Name	Middle Name	Last Name		
	btor 2					
` `	ouse if, filing)	First Name	Middle Name	Last Name		
Uni	ited States Ba	nkruptcy Court for the:	NORTHERN DISTRICT C	OF ILLINOIS		
	se number					Check if this is an amended filing
	ficial Fo		Affairs for Individ	duals Filing for B	ankruptcy	4/10
info nun	rmation. If m	ore space is needed n). Answer every que	ible. If two married people a , attach a separate sheet to stion. arital Status and Where You	this form. On the top of any		
		r current marital stat		Lived Belore		
1.	_	Current mantai Stat	us:			
	✓ Married✓ Not mar	ried				
•			Post described and advantages	order or a constitution of the constitution of		
2.	During the is	ast 3 years, have you	lived anywhere other than	where you live now?		
	□ No					
	■ Yes. Lis	it all of the places you	lived in the last 3 years. Do no	of include where you live now	·.	
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
	2852 W. D Chicago, I	iversey Avenue L 60647	From-To:	☐ Same as Debtor		☐ Same as Debtor 1 From-To:
3. state	es and territori	ies include Arizona, Ca	ver live with a spouse or legalifornia, Idaho, Louisiana, Newheld Hand Hand Hand Hand Hand Hand Hand Han	vada, New Mexico, Puerto R		
Pai	rt 2 Explai	n the Sources of You	ur Income			
4.	Fill in the tota	al amount of income yo	mployment or from operating ou received from all jobs and a have income that you received	all businesses, including part-	time activities.	endar years?
		l in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	r last calenda nuary 1 to De	r year: ecember 31, 2017)	■ Wages, commissions, bonuses, tips	\$18,753.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Case 18-18149 Doc 1 Filed 06/26/18 Entered 06/26/18 19:33:56 Desc Main

Page 39 of 56 Case number (if known) Document Debtor 1 Arley Silvestre Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) \$10,044.00 For the calendar year before that: □ Wages, commissions, Wages, commissions, (January 1 to December 31, 2016) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Nο Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income from** Sources of income **Gross income** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? □ No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. **Creditor's Name and Address Dates of payment Total amount** Amount you Was this payment for ... paid still owe Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for

Yes. List all payments to an insider.

Insider's Name and Address Dates of payment Total amount Amount you Reason for this payment paid still owe

Case 18-18149 Doc 1 Filed 06/26/18 Entered 06/26/18 19:33:56 Desc Main

Page 40 of 56
Case number (if known) Document Debtor 1 Arley Silvestre

8.	Within 1 year before you filed for bankrupto insider? Include payments on debts guaranteed or cosign		ments or transfer a	ny property o	on account of a d	ebt that benefited an
	■ No					
	☐ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount yo		this payment litor's name
Par	t 4: Identify Legal Actions, Repossessions	s, and Foreclosures				
9.	Within 1 year before you filed for bankruptc List all such matters, including personal injury of modifications, and contract disputes.					
	□ No ■ Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of th	ne case
	Barclays Bank Delaware v. Silvestre, Arley 2018-M1-102624		Richard J. Dale 50 W. Washing Chicago, IL 606	ton St.	■ Pending □ On appe	eal
	Midland Funding v. Silvestre, Arley 2018-M1-105960		Richard J. Dale 50 W. Washing Chicago, IL 606	ton St.	■ Pending □ On appe	eal
10.	Within 1 year before you filed for bankruptc Check all that apply and fill in the details below No. Go to line 11.		rty repossessed, fo	oreclosed, ga	arnished, attache	d, seized, or levied?
	Yes. Fill in the information below.					
	Creditor Name and Address	Describe the Property		D	ate	Value of the property
		Explain what happened				p. spans
11.	Within 90 days before you filed for bankrupt accounts or refuse to make a payment beca ■ No □ Yes. Fill in the details.		uding a bank or fin	ancial institu	ition, set off any a	amounts from your
	Creditor Name and Address	Describe the action the	creditor took		ate action was	Amount
12.	Within 1 year before you filed for bankruptc court-appointed receiver, a custodian, or an ■ No □ Yes		rty in the possessi	on of an assi	ignee for the ben	efit of creditors, a
Par	t 5: List Certain Gifts and Contributions					
13.	Within 2 years before you filed for bankrupt ■ No □ Yes. Fill in the details for each gift.	cy, did you give any gifts	s with a total value	of more than	\$600 per person	?
	Gifts with a total value of more than \$600 per person	Describe the gifts			Pates you gave he gifts	Value
	Person to Whom You Gave the Gift and Address:					

Case 18-18149 Doc 1 Filed 06/26/18 Entered 06/26/18 19:33:56 Desc Main

Page 41 of 56
Case number (if known) Document Debtor 1 Arley Silvestre

14.	Within 2 years before you filed for bankru ■ No □ Yes. Fill in the details for each gift or co		did you give any gifts or contributions with a totation.	al value of more than	\$600 to any charity?
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code		Describe what you contributed	Dates you contributed	Value
Par	t 6: List Certain Losses				
	Within 1 year before you filed for bankrup or gambling?	ptcy or	since you filed for bankruptcy, did you lose any	thing because of the	ft, fire, other disaster,
	■ No □ Yes. Fill in the details.				
	Describe the property you lost and how the loss occurred	Include	ibe any insurance coverage for the loss e the amount that insurance has paid. List pending nce claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Par	t 7: List Certain Payments or Transfers	;			
	consulted about seeking bankruptcy or place any attorneys, bankruptcy petition position. No Yes. Fill in the details.	repari	rs, or credit counseling agencies for services require		rty to anyone you
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Y	ou	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Community Lawyers Group, Ltd. 73 W. Monroe, Suite 502 Chicago, IL 60603 cchatman@communitylawyersgrou om	p.c	Attorney Fees		\$765.00
	Debtorcc, Inc		credit counseling		\$14.95
	www.debtorcc.org				
	Within 1 year before you filed for bankrup promised to help you deal with your cred Do not include any payment or transfer that	litors o		or transfer any prope	rty to anyone who
	■ No □ Yes. Fill in the details.				
	Person Who Was Paid Address		Description and value of any property transferred	Date payment or transfer was made	Amount of payment

Entered 06/26/18 19:33:56 Doc 1 Filed 06/26/18 Desc Main Case 18-18149 Page 42 of 56
Case number (if known) Document

Debtor 1 Arley Silvestre

18.	Within 2 years before you filed for bankruptcy transferred in the ordinary course of your bus include both outright transfers and transfers mad include gifts and transfers that you have already No Yes. Fill in the details.	siness or financial affa le as security (such as t	iirs? he granting of a s		
	Person Who Received Transfer Address Person's relationship to you	Description and v property transferr		Describe any property or payments received or debts paid in exchange	Date transfer was made
19.	Within 10 years before you filed for bankrupto beneficiary? (These are often called asset-prote ■ No □ Yes. Fill in the details.		y property to a s	self-settled trust or similar device	e of which you are a
	Name of trust	Description and v	alue of the prop	erty transferred	Date Transfer was made
Par	List of Certain Financial Accounts, Inst	ruments, Safe Deposit	Boxes, and Sto	rage Units	
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, association of the cooperatives. No	other financial accour	nts; certificates o	of deposit; shares in banks, cred	
		Last 4 digits of account number	Type of accour instrument	nt or Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 ye cash, or other valuables?	ear before you filed for	bankruptcy, any	y safe deposit box or other depo	sitory for securities,
	NoYes. Fill in the details.				
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe the contents	Do you still have it?
22.	Have you stored property in a storage unit or	place other than your	home within 1 y	ear before you filed for bankrup	tcy?
	■ No □ Yes. Fill in the details.				
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)		Describe the contents	Do you still have it?
Par	t 9: Identify Property You Hold or Control fo	or Someone Else			
23.	Do you hold or control any property that som for someone.	eone else owns? Inclu	ude any property	y you borrowed from, are storing	for, or hold in trust
	■ No □ Yes. Fill in the details.				
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe the property	Value
Par	t 10: Give Details About Environmental Infor	mation			
For	the purpose of Part 10, the following definition	ns apply:			

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

Case 18-18149 Doc 1 Filed 06/26/18 Entered 06/26/18 19:33:56 Desc Main Page 43 of 56 Case number (if known) Document

Debtor 1 **Arley Silvestre**

> toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

ort all notices, releases, and proceedings that y	ou know about, regardless of wher	they occurred.			
4. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?					
■ No □ Yes. Fill in the details.					
Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice		
Have you notified any governmental unit of any	y release of hazardous material?				
■ No □ Yes. Fill in the details.					
Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice		
6. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.					
■ No □ Yes. Fill in the details.					
Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case		
t 11: Give Details About Your Business or Cor	nnections to Any Business				
Within 4 years before you filed for bankruptcy,	did you own a business or have an	y of the following connections to any	business?		
☐ A sole proprietor or self-employed in a	trade, profession, or other activity,	either full-time or part-time			
☐ A member of a limited liability company	y (LLC) or limited liability partnersh	ip (LLP)			
☐ A partner in a partnership					
☐ An officer, director, or managing execu	tive of a corporation				
☐ An owner of at least 5% of the voting or	r equity securities of a corporation				
■ No. None of the above applies. Go to Part	12.				
☐ Yes. Check all that apply above and fill in t	the details below for each business	5.			
	escribe the nature of the business	Employer Identification number			
	ame of accountant or bookkeeper				
Within 2 years before you filed for bankruptcy, institutions, creditors, or other parties.	did you give a financial statement t		de all financial		
■ No □ Yes. Fill in the details below.					
Name Address (Number, Street, City, State and ZIP Code)	ate Issued				
	No No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Have you notified any governmental unit of any No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Have you been a party in any judicial or adminition of the party o	Has any governmental unit notified you that you may be liable or potentially liable No No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Have you notified any governmental unit of any release of hazardous material? No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Have you been a party in any judicial or administrative proceeding under any envi No Yes. Fill in the details. Case Title Case Number State and ZIP Code) Governmental unit Address (Number, Street, City, State and ZIP Code) No No Have you been a party in any judicial or administrative proceeding under any envi No No Have you been a party in any judicial or administrative proceeding under any envi No No Have you been a party in any judicial or administrative proceeding under any envi No No Have you been a party in any judicial or administrative proceeding under any envi No Name Address (Number, Street, City, State and ZIP Code) No Have Details About Your Business or Connections to Any Business Within 4 years before you filed for bankruptcy, did you own a business or have an Asole proprietor or self-employed in a trade, profession, or other activity, A member of a limited liability company (LLC) or limited liability partnersh A partner in a partnership An officer, director, or managing executive of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business Business Name Address (Number, Street, City, State and ZIP Code) No Nome of accountant or bookkeeper Within 2 years before you filed for bankruptcy, did you give a financial statement to institutions, creditors, or other parties. No Yes. Fill in the details below. Name Address	No No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Case Title Court or agency Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name N		

Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107 page 6 Case 18-18149 Doc 1 Filed 06/26/18 Entered 06/26/18 19:33:56 Desc Main Page 44 of 56
Case number (if known) Document

Debtor 1 Arley Silvestre

/s/ Arley Silvestre		
Arley Silvestre Signature of Debtor 1	Signature of Debtor 2	
Date June 26, 2018	Date	
Did you attach additional pages to You	r Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 10	7)?
■ No		

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Case 18-18149 Filed 06/26/18 Entered 06/26/18 19:33:56 Desc Main Doc 1 Document Page 45 of 56

			3.5	
Fill in this infor	mation to identify your	case:		
Debtor 1	Arley Silvestre			
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DIS	TRICT OF ILLINOIS	
Office States De	arikruptcy Court for the.	TOTT THE TOTAL BIO	THE OF ILLINOIS	
Case number (if known)				Check if this is an amended filing
Official Fo		n for India	viduals Filing Under Chapt	or 7
Stateme	iii oi iiiteiitio	ii ioi iiidiv	<u>riduals Filing Under Chapt</u>	:er / 12/15
■ creditors hav ■ you have leas You must file th whiche on the If two married posign and Be as complete write y Part 1: List Y	ever is earlier, unless the form eople are filing together and date the form. and accurate as possibly our name and case nure four Creditors Who Have tors that you listed in Particular and the four	ur property, or and the lease has no inthin 30 days after the court extends the r in a joint case, bother. If more space is inber (if known).		he creditors and lessors you list information. Both debtors must n the top of any additional pages,
	elow. reditor and the property t	hat is collateral	What do you intend to do with the property the	
			secures a debt?	as exempt on Schedule C?
Creditor's			☐ Surrender the property.	□ No
name:			Retain the property and redeem it.	
Description of	f		☐ Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property			☐ Retain the property and [explain]:	
securing debt				
Creditor's			☐ Surrender the property.	□ No
name:			Retain the property and redeem it.	
			Retain the property and enter into a	☐ Yes

Official Form 108

Creditor's

Description of

securing debt:

Description of

securing debt:

property

Creditor's

name:

property

Statement of Intention for Individuals Filing Under Chapter 7

 \square Surrender the property.

☐ Retain the property and enter into a

☐ Retain the property and [explain]:

☐ Retain the property and redeem it.

 $\hfill\square$ Retain the property and enter into a

Reaffirmation Agreement.

☐ Retain the property and [explain]:

Reaffirmation Agreement.

☐ Surrender the property.

□ No

☐ Yes

☐ No

Case 18-18149 Doc 1 Filed 06/26/18 Entered 06/26/18 19:33:56 Desc Main Document Page 46 of 56

Debtor 1	Arley Silvestre	Case number (if known)	
name: Descrip property		 □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: 	□Yes
securin	g debt:		-
For any ur in the info	rmation below. Do not list real esta	perty Leases lat you listed in Schedule G: Executory Contracts and Unexpired te leases. Unexpired leases are leases that are still in effect; the berty lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2	lease period has not yet ended.
Describe	your unexpired personal property	leases	Will the lease be assumed?
Lessor's n Descriptio Property:	name: on of leased		□ No
r roporty.			☐ Yes
Lessor's n Descriptio Property:	name: on of leased		□ No □ Yes
Lessor's n Descriptio Property:	name: on of leased		□ No
Lessor's n Descriptio Property:	name: on of leased		□ No □ Yes
Lessor's n Descriptio Property:	name: on of leased		□ No
Lessor's n Descriptio Property:	name: on of leased		□ No
Lessor's n	name: on of leased		□ Yes □ No
Property:	6		☐ Yes
Under pen	Sign Below nalty of perjury, I declare that I have hat is subject to an unexpired lease	indicated my intention about any property of my estate that sec	cures a debt and any personal
X /s/ A	Arley Silvestre	X	
Arle	ey Silvestre ature of Debtor 1	Signature of Debtor 2	
Date	June 26, 2018	Date	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

- \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
·	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 18-18149 Doc 1 Filed 06/26/18 Entered 06/26/18 19:33:56 Desc Main Document Page 51 of 56

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

In re	Arley Silvestre		Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPEN	NSATION OF ATTO	RNEY FOR D	EBTOR(S)	
С	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(compensation paid to me within one year before the filing the rendered on behalf of the debtor(s) in contemplation of	g of the petition in bankruptcy	, or agreed to be paid	to me, for services rend	ered or to
	For legal services, I have agreed to accept		\$	765.00	
	Prior to the filing of this statement I have received		\$	765.00	
	Balance Due		\$	0.00	
2. T	The source of the compensation paid to me was:				
	\blacksquare Debtor \square Other (specify):				
3. Т	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4. I	I have not agreed to share the above-disclosed comp	ensation with any other person	unless they are men	bers and associates of m	y law firm.
I	☐ I have agreed to share the above-disclosed compensations copy of the agreement, together with a list of the name				firm. A
5. I	n return for the above-disclosed fee, I have agreed to re	nder legal service for all aspec	ts of the bankruptcy	case, including:	
b c	 Analysis of the debtor's financial situation, and rende Preparation and filing of any petition, schedules, state Representation of the debtor at the meeting of credito [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on how 	ement of affairs and plan which ors and confirmation hearing, a educe to market value; ex ns as needed; preparatior	n may be required; nd any adjourned her emption planning	arings thereof;	ng of
5. E	By agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any dis any other adversary proceeding.			es, relief from stay a	ctions or
		CERTIFICATION			
	certify that the foregoing is a complete statement of any ankruptcy proceeding.	y agreement or arrangement fo	r payment to me for	representation of the deb	tor(s) in
Ju	ine 26, 2018	/s/ Celetha Chatr	nan		
D_{ℓ}	ate	Celetha Chatmar			
		Signature of Attorn Community Law	yers Group, Ltd.		
		73 W. Monroe, S	uite 502		
		Chicago, IL 6060 312-561-5516 Fa			
		cchatman@com	munitylawyersgro	up.com	
		Name of law firm			

United States Bankruptcy Court Northern District of Illinois

In re	Arley Silvestre		Case No.			
		Debtor(s)	Chapter 7			
	VERIFICATION OF CREDITOR MATRIX					
		Number of Creditors: 34				
	The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.					
Datas	June 26, 2018	/s/ Arley Silvestre				

Armor System Corp. 1700 Kiefer Dr. Suite 1 Zion, IL 60099

ARMOR SYSTEMS CORP 1700 KIEFER DR STE 1 Zion, IL 60099

Barclays Bank Delaware 125 South West Street Wilmington, DE 19801

Capital One Bank USA NA PO Box 30281 Salt Lake City, UT 84130

Chase Bank Cardmember Service PO BOX 15548 Wilmington, DE 19886

Client Services, Incorporated Saint Charles, MO Saint Charles, MO 63301

COM Ed PO BOX 5228 Hinsdale, IL 60522

Discover Financial Services PO Box 15316 Wilmington, DE 19850

DSNB/Macys Po Box 8218 Mason, OH 45040

FEDERAL LOAN SERVICING PO BOX 60610 Harrisburg, PA 17106

FEDERAL LOAN SERVICING PO BOX 60610 Harrisburg, PA 17106 FEDERAL LOAN SERVICING PO BOX 60610 Harrisburg, PA 17106

FEDERAL LOAN SERVICING PO BOX 60610 Harrisburg, PA 17106

FEDERAL LOAN SERVICING PO BOX 60610 Harrisburg, PA 17106

FEDERAL LOAN SERVICING PO BOX 60610 Harrisburg, PA 17106

FEDERAL LOAN SERVICING PO BOX 60610 Harrisburg, PA 17106

FEDLOAN SERVICING POB 60610 Harrisburg, PA 17106

Firstsource Advantage, LLC 205 Bryant Woods South Buffalo, NY 14228

Howard Brown Health Center 415 W. Golf Road Suite 16 Arlington Heights, IL 60005

Lendup 47 Maiden LN FL. 3 San Francisco, CA 94108

LTd Financial Services Limited Par 7322 Southwest Freeway, Suite 1600 Houston, TX 77074

Midland Funding LLC 8875 Aero Drive Suite 200 San Diego, CA 92123 MiraMed Revenue Group, LLC Dept. 77304 P.O. Box 77000 Detroit, MI 48277

Paypal Credit PO Box 105658 Atlanta, GA 30348

People's Gas Bankruptcy Department 130 E. Randolph Drive. Chicago, IL 60601

Portfolio Recovery Associates, LLC Riverside Commerce Center 120 Corporate Blvd Ste. 100 Norfolk, VA 23502

Presence Health PO BOX 74008843 Chicago, IL 60674

Presence Saints Mary Med Ctr 33368 Collection Center Dr. Chicago, IL 60693

RGS Collections, Inc. 1700 Jay Ell Dr. Suite 200 Richardson, TX 75081

SCH Laboratory Physicians, SC 5700 Southwyck Blvd. Toledo, OH 43614

SCH Laboratory Physicians, SC 5700 Southwyck Blvd. Toledo, OH 43614

Swedish Covenant Hospital 5145 N. California Ave. Chicago, IL 60625

SYNCB/AMAZON PLCC PO BOX 965015 Orlando, FL 32896

SYNCB/OLDNAVYDC PO BOX 965005 Orlando, FL 32896